

Grant & Per Diem: Request Capital Payment

How-To: **Submit a Capital payment request**

[GPD Provider Webpage](#)

Step 1: Log into SmartSimple

Access Smart Simple: https://hmlsgrants-va.mod.udpaas.com/s_Login.jsp

- Your agency's SmartSimple point of contact logs into the system
- Enter your email address and password and click the Log In button:

VHA Homeless Grants: SSVF and GPD

Login

Email
Snow.White@gmail.com

Password

Log In

Forgot Password?

New to the System?
Register

Welcome to VHA Homeless Program Grants

Welcome to the Department of Veterans Affairs grants management portal for VHA's Homeless Programs Office. This portal supports a variety of grant functions associated with the Supportive Services for Veteran Families (SSVF) and Grant and Per Diem (GPD) Programs.

Step 2: From Main, select the appropriate grant award under My Grants

From the SmartSimple main page look under **My Grants** for the Capital **FAIN/Grant ID** for which you would like to submit a payment request.

You must open your grant record to submit a payment request

Organization Profile

User Profile

Change Password

Grant Rounds

1:1 of 1

Opportunity Details

Open

Grant and Per Diem
2023 GPD Capital Grant - ASP
Deadline: 12/06/2021 16:01

My Applications

DRAFT (1) SUBMITTED (1)

1:1 of 1

Program Type FAIN/Grant ID Organization Name Status Grant Fiscal Year

1 Grant and Per Diem Capital TEST234-2822-GP-22 GPD TESTING, INC Draft

My Grants

ALL GRANTS (2)

1:2 of 2

Program Type FAIN/Grant ID Organization Name Status Grant Fiscal Year

1 Grant and Per Diem Special Need TEST234-2869-402-SH-22 GPD TESTING, INC Approved

2 Grant and Per Diem Special Need TEST234-2870-479-SH-22 GPD TESTING, INC Approved

My Tasks

ALL TASKS (1) PRELIMINARY DOCUMENT REQUEST (0)

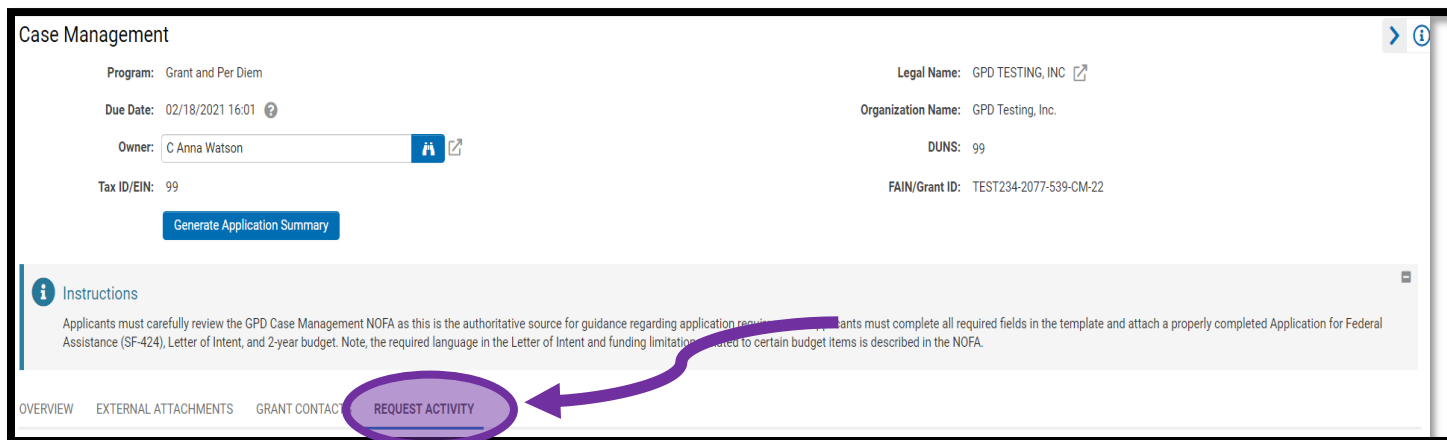
1:1 of 1

Organization Name Grant Type Grant ID Activity Type Status

1 GPD TESTING, INC Special Need TEST234-2869-402-SH-22 Initial Per Diem Rate Request Draft

Step 3: Navigate to Request Activity tab

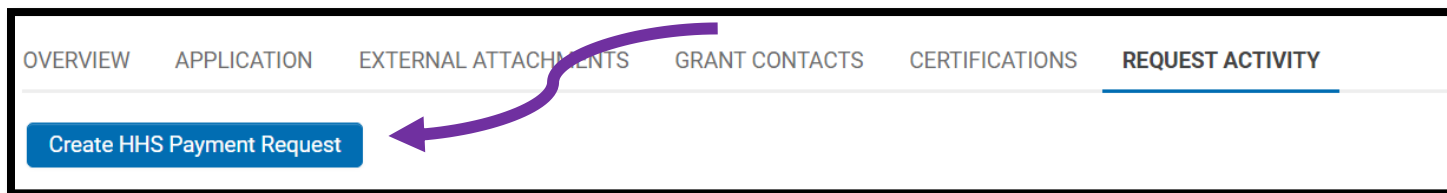
When the grant record opens it defaults to the Overview tab. Navigate to the **Request Activity** tab on the far right and select this tab.



The screenshot shows the 'Case Management' interface. At the top, there are fields for 'Program: Grant and Per Diem', 'Due Date: 02/18/2021 16:01', 'Owner: C Anna Watson', 'Tax ID/EIN: 99', 'Legal Name: GPD TESTING, INC', 'Organization Name: GPD Testing, Inc.', 'DUNS: 99', and 'FAIN/Grant ID: TEST234-2077-539-CM-22'. A blue button labeled 'Generate Application Summary' is visible. Below this is an 'Instructions' section with a blue information icon and text: 'Applicants must carefully review the GPD Case Management NOFA as this is the authoritative source for guidance regarding application requirements. Applicants must complete all required fields in the template and attach a properly completed Application for Federal Assistance (SF-424), Letter of Intent, and 2-year budget. Note, the required language in the Letter of Intent and funding limitations related to certain budget items is described in the NOFA.' At the bottom, there is a horizontal navigation bar with tabs: 'OVERVIEW', 'EXTERNAL ATTACHMENTS', 'GRANT CONTACTS', and 'REQUEST ACTIVITY'. The 'REQUEST ACTIVITY' tab is highlighted with a purple oval, and a purple arrow points to it from the 'Instructions' section.

Step 4: From the REQUEST ACTIVITY tab; select CREATE Quarterly Report

From the **Request Activity** tab select the **Create HHS Payment Request** (blue button)



The screenshot shows the 'REQUEST ACTIVITY' tab selected in the navigation bar. The navigation bar includes tabs: 'OVERVIEW', 'APPLICATION', 'EXTERNAL ATTACHMENTS', 'GRANT CONTACTS', 'CERTIFICATIONS', and 'REQUEST ACTIVITY'. The 'REQUEST ACTIVITY' tab is highlighted with a blue underline. Below the navigation bar, there is a blue button labeled 'Create HHS Payment Request'. A purple arrow points to this button from the 'EXTERNAL ATTACHMENTS' tab.

Step 5: Open Create HHS Payment Request; complete form

Step 1: Complete the form (Amount Requested, Name, Title, Email); instructions for each field must be followed exactly or the activity will be returned for corrections

←

Actions ▾

Type: HHS Payment Request

Organization Name: GPD TESTING, INC

> ⓘ

Grant ID:

Status:

* Amount Requested:

This amount must match exactly to the amount requested in HHS Division of Payment Management System

* SF-270, SF-271, and/or Invoices

Grantees must upload the SF-270 (acquisition) or SF-271 (rehabilitation/construction) that corresponds to the payment draw request in HHS. Additionally, associated invoices to substantiate costs incurred related to this payment request must be attached. Failure to provide the proper documentation will result in your request being rejected.

Click Save before adding attachments

AUTHORIZED SUBMITTING

Subject to the provisions of the Program Fraud Civil Remedies Act of 1986 (18 USC 287 and 31 USC 3729); and False Statements Act (18 USC 1001), I declare to the best of my knowledge the foregoing is true and correct.

* Authorized submitting official's name

* Authorized submitting official's title

* Authorized submitting official's email

Save Draft

Step 2: Click Save Draft for the upload documents button to appear

Step 3: Upload all relevant forms and invoices for payment

* Upload SF-270, SF-271 and Invoices




1. Upload the SF-270 (acquisition) and/or SF-271 (rehabilitation/construction) that corresponds to the payment draw request in HHS.
2. Upload associated invoices to substantiate costs incurred related to this payment request. Advances are **NOT** authorized, except for acquisition of land or a facility. Failure to attach the proper documentation will result in your request being rejected.







Step 4: Verify all your documents were uploaded and appear under “File Name”

* Upload SF-270, SF-271 and Invoices

1. Upload the SF-270 (acquisition) and/or SF-271 (rehabilitation/construction) that corresponds to the payment draw request in HHS.
2. Upload associated invoices to substantiate costs incurred related to this payment request. Advances are **NOT** authorized, except for acquisition of land or a facility.
Failure to attach the proper documentation will result in your request being rejected.

 File Name	Size	Date
 SF270.pdf	189.9 KB	12/13/2021 08:10

Total Files: 1

Step 5: Click “Submit” *Your request will not come through to our office without this step**

AUTHORIZED SUBMITTING

Subject to the provisions of the Program Fraud Civil Remedies Act of 1986 (18 USC 287 and 31 USC 3729); and False Statements Act (18 USC 1001), correct.

* Authorized submitting official's name


First Last

* Authorized submitting official's title

CFO

* Authorized submitting official's email

firstlast@gmail.com

 Save Draft

Submit






Step 6: Navigate to main page; activity should be in pending status

After submitting the payment request, navigate to the SmartSimple main page (shown in step 2) and your activity/task will indicate **Submitted** status.

GPD program staff will review your request and reach out to the identified point of contact, if there are questions/issues. **Grantees may only request funds once they have CFM approval.**

ALL TASKS (20)

PRELIMINARY DOCUMENT REQUEST (0)

	1-20 of 20							
	#	Organization Name	Grant Type	Grant ID	Activity Type	Status		
	1	GPD TESTING, INC	Capital Grant	TEST234-2849-570-CG-22	HHS Payment Request	Submitted		

Step 7: Approval; activity complete

Grantee will only be notified if corrections are needed, otherwise it will be reviewed and accepted for payment. Grantees will see the request updated to *Approved* status under “My Tasks” AND our office will process the corresponding payment request in HHS. Funds will be sent to the organization via EFT.

My Tasks

ALL TASKS (20) PRELIMINARY DOCUMENT REQUEST (0)

GPD TESTING, INC	Capital Grant	TEST234-2849-570-CG-22	HHS Payment Request	Approved
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For future payment requests, complete another *Create HHS Payment Request* activity/task.